



## AEROBIC WINTER CHALLENGE 2004

### Sample TEAM MONTHLY REPORT



Team Name \_\_\_\_\_ Go-Getters \_\_\_\_\_  
 Worksite \_\_\_\_\_ XYZ Company \_\_\_\_\_  
 Total Number of Team Members (must be between 5 and 10 people) \_\_\_\_\_ 7 \_\_\_\_\_

**TEAM NAME AND/OR MEMBERS CANNOT CHANGE AFTER OCTOBER 22**

- ❖ Please alphabetize members by their last name – Thank you!
- ❖ Record beginner or regular status for each participant. This does not change for the rest of the Challenge.
- ❖ Place (X) if the participant was a beginner who was physically active 12 times, or a regular who was physically active 16 times during that month. Place (NC) if the participant did not complete their activity level for that month.

	Team Members (TL = Team Leader)	beg or reg	NOV X or NC	DEC X or NC	JAN X or NC	FEB X or NC	Tobacco Free in Feb? Yes, No, or N/A
TL	Rhonda Runner – TL	r	X	NC	X		N/A
2	Bill Biker	r	X	X	NC		N/A
3	Denise Dancer	b	NC	X	X		N/A
4	Matt Mountain-Man	b	X	NC	X		N/A
5	Sybil Skater	r	NC	X	X		N/A
6	Seth Skier	b	X	X	X		N/A
7	Silvia Swimmer	r	X	X	X		N/A
8							
9							
10							

**TEAM LEADERS** - please fill out and **turn in a copy to your Worksite Coordinator** by:

♥ December 3, ♥ January 11, ♥ February 4, and ♥ March 4

**WORKSITE COORDINATOR** - please send in to the Heartbeat office by:

♥ December 6, ♥ January 12, ♥ February 7, and ♥ March 7.

You may **fax** to 522-7855. No cover sheet necessary. Or you may **e-mail** reports [pcady@coconino.az.gov](mailto:pcady@coconino.az.gov)

**THANK YOU!**